UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

126778

| OMB APPROVAL | | | | | | | |
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| OMB Number: | 3235-0076 | | | | | | |
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| SEC USE ONLY | | | | | | | | |
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| UNIFORM LIMITED OFFERING EXEM | PTION |
|---|---|
| Name of Offering (check if this is an amendment and name has changed, and indicate change.) | |
| Seres B Preferred Stock | |
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) | ☐ ULOE |
| Type of Filing: | I TOTAL SOME CHAIR COME ALONG CHAIR COME ADDRESS. |
| A. BASIC IDENTIFICATION DATA | |
| 1. Enter the information requested about the issuer | |
| Name of Issuer (check if this is an amendment and name has changed, and indicate change.) | 06049407 |
| Novazone Incorporated | |
| Address of Executive Offices (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| 2575 Collier Canyon Road, Livermore, CA 94451 | (925) 454-0303 |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) | Telephone Number (Including Area Code) |
| Brief Description of Business | PROCESSED |
| Ozone-based purification technologies | |
| | DEC 1 3 2006 |
| Type of Business Organization | 026 1 0 2000 |
| ✓ corporation ☐ limited partnership, already formed ☐ other (☐ business trust ☐ limited partnership, to be formed | please specify): E THOMSON |
| Actual or Estimated Date of Incorporation or Organization: 10 9 9 Actual Esti Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Stat CN for Canada; FN for other foreign jurisdiction) | |
| GENERAL INSTRUCTIONS | |
| Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 77d(6). | |
| When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given which it is due, on the date it was mailed by United States registered or certified mail to that address. | below or, if received at that address after the date on |
| Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 2 | |
| Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual photocopies of the manually signed copy or bear typed or printed signatures. | |
| Information Required: A new filing must contain all information requested. Amendments need only rep thereto, the information requested in Part C, and any material changes from the information previously support be filed with the SEC. | ort the name of the issuer and offering, any changes plied in Parts A and B. Part E and the Appendix need |
| Filing Fee: There is no federal filing fee. | |
| State: This paties shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for | sales of securities in those states that have adopted |

This notice shall be used to indicate reliance on the Uniform ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

| | <u>. 16 % </u> | | NTIFICATION DATA | | |
|--|------------------------|-----------------------------|-----------------------------|----------------------|--------------------------------------|
| Enter the information rec | | | d d | | |
| Each promoter of the | e issuer, if the issue | er has been organized wit | thin the past five years; | £ 100/ of a | alose of aquity recurities of the is |
| Each beneficial own | er having the power | to vote or dispose, or dire | ect the vote or disposition | oi, 10% or more of a | class of equity securities of the is |
| | | | corporate general and man | aging partners of p | artnership issuets, and |
| Each general and m | anaging partner of | partnership issuers. | | | |
| neck Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | ☑ Director | General and/or Managing Partner |
| Il Name (Last name first, if | individual) | | | | |
| isiness or Residence Addre | s (Number and S | treet, City, State, Zip Co | de) | | |
| 575 Collier Canyon Roa | d, Livermore, CA | 94551 | | | |
| heck Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | | General and/or Managing Partner |
| ull Name (Last name first, i Veiss, Warren | f individual) | | | | |
| usiness or Residence Addre | ss (Number and S | Street, City, State, Zip Co | ode) | | |
| o 2575 Collier Canyon F | | | | | |
| heck Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| ull Name (Last name first, Grauer, Fred | f individual) | | | | |
| Business or Residence Addre | SS (Number and | Street, City, State, Zip C | ode) | | |
| o 2575 Collier Canyon | | | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Office | Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Connolly, Philip G. Business or Residence Addr | orr (Number and | Street, City, State, Zip C | (ode) | | |
| 2575 Collier Canyon Ro | | | • | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Office | r 🕜 Director | General and/or Managing Partner |
| Full Name (Last name first, Sullivan, Gregory | if individual) | | | | |
| Business or Residence Add | ress (Number and | Street, City, State, Zip (| Code) | | |
| c/o 2575 Collier Canyor | Road, Livermor | e, CA 94551 | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Office | er Director | General and/or Managing Partner |
| Full Name (Last name first | , if individual) | | | | |
| Business or Residence Add | ress (Number and | 1 Street, City, State, Zip | Code) | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owne | r Executive Offic | er Director | General and/or Managing Partner |
| Full Name (Last name first | , if individual) | | | | |
| Business or Residence Add | iress (Number an | d Street, City, State, Zip | Code) | | |
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| ¥° | , chair | \$575.23 Page 1.00 de | | B. IN | FORMATIC | N ABOUT | OFFERIN | $\mathbf{G}_{A^{\prime}B^{\prime}}$ | in his | Set De Sant | والمهرف يهورا | Opening A |
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| 1 Unatha | icenar cold | , or does the | iggner int | end to sell | to non-acc | credited in | vestors in | this offerin | ıg? | ., | Yes | No ⊠ |
| 1. Has the | 1990ct 2010 | , or aues are | | | Appendix, | | | | | | _ | _ |
| 2. What is the minimum investment that will be accepted from any individual? | | | | | | | | | , | s_2,50 | 0.00 | |
| | | | | | | | | | | | Yes ┌┐ | No ⊠ |
| 4 Enter th | to the base or will be paid or given directly or indirectly. | | | | | | | | ectly, any | نت | ائدة | |
| commis If a pers or state a broke | sion or simi son to be list s, list the na r or dealer. | lar remuner led is an asso me of the br you may se | ation for so ociated per- oker or dea of forth the | licitation (son or age: iler. If mo: | of purchase nt of a broke re than five | rs in connec er or dealer (5) person: | ction with s registered s to be liste | with the SI d are assoc | urities in th EC and/or v | e offering. vith a state | | |
| Full Name (| Last name i | first, if indi | vidual) | | | | | | | | | |
| Business or | Residence | Address (N | umber and | Street, Cit | y, State, Zi | ip Code) | | | | | | |
| Name of As | sociated Br | oker or Dea | ıler | | | | | | | · | | |
| States in W | hich Person | Listed Has | Solicited of | or Intends | to Solicit F | urchasers | | | | | | |
| | | or check | | | | | | | | | ☐ All | States |
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| MT | NE | NV | NH TN | NJ TX | NM [UT] | NY [VT] | [NC] | ND WA | OH WV | OK) | OR WY | PA PR |
| RI | SC. | SD | | | | | | | | | | |
| Full Name | (Last name | first, if indi | ividual) | | | | | | | | _ | |
| Business o | r Residence | Address () | Yumber an | d Street, C | ity, State, 2 | Zip Code) | | <u>. </u> | | | | |
| Name of A | ssociated B | roker or De | aler | | | <u></u> | | | | | | · • • • • • • • • • • • • • • • • • • • |
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| Name of A | ssociated E | troker or De | ealer | | | | | | <u>. </u> | | | |
| | | n Listed Ha | | | | | | . | | | _ · | II Centan |
| (Chec | k "All State | es" or check | individua | l States) | ••••••• | | ***************** | | | | ∐ A | ll States |
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| IL NAT | IN NE | IA NV | KS NH | KY NJ | LA NM | ME NY | MD NC | MA ND | MI OH | MN OK | OR | PA |
| MT RI | NE SC | SD | TN | TX | UT | VT | VA | WA | WV | WI | \overline{WY} | PR |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Sold Offering Price Type of Security \$ 0.00 0.00 Debt 6,268,596.00 Common Preferred Convertible Securities (including warrants)......\$_ 0.00 0.00 Other (Specify 6,268,596.00 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number of Purchases Investors \$ 6,268,596.00 Accredited Investors.... \$ 0.00 Non-accredited Investors § 0.00 Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Dollar Amount Type of Sold Security Type of Offering Rule 505 Regulation A Rule 504 Total_ Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs.... 40,000.00 Legal Fees Accounting Fees Engineering Fees

.....

40,000.00

Sales Commissions (specify finders' fees separately)

Total

Other Expenses (identify) ___

| 2 | C OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF | ROCÉEDS | The state of the s |
|----|--|--|--|
| | b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer." | i | \$6,960,000.00 |
| i. | Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above. | | |
| | , | Payments to | |
| | | Officers, Directors, & | Payments to |
| | | Affiliates | Others |
| | Salaries and fees | s | s |
| | Purchase of real estate | | |
| | Purchase, rental or leasing and installation of machinery | | _ |
| | and equipment | . 🔲 \$ | |
| | Construction or leasing of plant buildings and facilities | · 🔲 \$ | \$ |
| | Acquisition of other businesses (including the value of securities involved in this | | |
| | as a second to the second for the recets of securities of another | | m s |
| | issuer pursuant to a merger) | L3 | - U |
| | Repayment of indebtedness | · 🗆 » | |
| | Working capital | 🗆 \$ | _ <u>\</u> \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| | Other (specify): | - 🗆 \$ | _ 🗆 \$ |
| | | 🗌 \$ | _ 🗆 \$ |
| | Column Totals | | |
| | | | 5,960,000.00 |
| | Total Payments Listed (column totals added) | - | |
| ٢ | D. FEDERAL SIGNATURE | THE PROPERTY. | no management of the state of t |
| | ne issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this not gnature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Comme information furnished by the issuer to any non-accredited investor pursuant to paragraph. (b)(2) | ice is filed under R nission, upon writ | ule 505, the following |
| İs | suer (Print or Type) Signature | Date i l | 1,100 |
| | lovazone Incorporated | | |
| _ | ame of Signer (Print or Type) Title of Signer (Print or Type) | | |
| | afficer Chief Financial Officer | | |
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- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| 3 5-7 | E STATE SIGNATURE | | and the |
|--------------|---|-----------|---------------|
| | Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? | Yes | No |
| | See Appendix, Column 5, for state response. | | |
| | de la companya de la | iled a ne | ntice on Forn |

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

| • | |
|------------------------|-------------------------|
| Issuer (Print or Type) | Signature Date il 106 |
| Novazone Incorporated | Harry Com |
| Name (Print or Type) | Title (Print or Type) |
| Philip G. Connolly | Chief Financial Officer |

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

| 11. | APPENDIX. | | | | | | | | | | | |
|-------|----------------------------------|--|--|--------------------------------------|--|--|--------|-----|--|--|--|--|
| 1 | Intend to non-ac investors | to sell ccredited s in State -Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | | Type of investor and amount purchased in State (Part C-Item 2) | | | | 5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No | | | |
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| CA | | × | Series B Preferred | 6 | \$3,268,595.0 | 0 | \$0.00 | | × | | | |
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|--------|--|--|--|--------------------------------------|--------------|--|---------------------------------------|--------------------|----|
| 1 | Intend to non-a investor | I to sell ccredited s in State -Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | | | 5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
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| 1 | Intend to non-a investor | i to sell accredited is in State | Type of security and aggregate offering price offered in state (Part C-Item 1) | | 4 Type of investor and amount purchased in State (Part C-Item 2) | | | | lification ate ULOE attach ation of granted) -Item 1) |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| WY | | | | | | | | | <u> </u> |
| PR | | | | | | | | | |